FCC Form 502

OMB Approved No: 3060-0895

Expires 12/31/00

Est. Average Burden Per Response: 24 Hours

Notice: The ten digit North American Numbering Plan currently being used by the United States and 19 other countries is rapidly being depleted. Management of this resource is impaired by a lack of uniform data. Under the *Communications Act Of 1934 as amended by The Telecommunications Act of 1996* the FCC was given "exclusive jurisdiction over those portions of the North American Numbering Plan that pertain to the United states." Pursuant to that authority the Commission conducted a rulemaking that among other things addressed regular reporting on numbering use by United States carriers. In its *Report and Order* in CC Docket No. 99-200, *In the Matter of Numbering Resource Optimization* (rel. Mar. 31, 2000) the Commission found that mandatory data collection is necessary to efficiently monitor and manage numbering use. Your response is mandatory.

The information will be used by the FCC, state regulatory commissions, and the North American Numbering Plan Administrator (NANPA) to monitor numbering resources utilization by all carriers using the resource and to project the dates of area code and North American Numbering Plan exhaust.

An agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid control number. The control number assigned to this collection is 3060-0895.

Public reporting burden for this collection of information is estimated to average 24 hours per response including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554 (3060-0895). **Do not send data responses to this address**.

FCC Form 502 June 2000

GENERAL INSTRUCTIONS

Users that are familiar with these forms may proceed directly to the "Main Menu"

Main N	лe	n	Į
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This report contains twelve forms for collecting utilization and forecast data from carriers.

All carriers should file at least three forms: (1) one company information form; (2) one utilization data form; and (3) one forecast data form. Many carriers will need to file more than one utilization or forecast form. For example, carriers that receive numbers from both the Numbering Administrator and another carrier must file separate Primary and Intermediate carrier forms.

Which forms should be filed is determined by whether the carrier is:

- 1) a Primary or Intermediate Carrier;
- 2) a Rural or Non-Rural Carrier;
- 3) a Pooling or Non-Pooling Carrier;
- 4) in a Pooling or Non-Pooling Area;
- 5) reporting Initial or Growth Codes.

To proceed, click on the "Company Information" button below and fill in the requested information. Instructions for filling in company information are on the form. Once this information is filled in, it is automatically transferred to any other form selected by the user. After this form is complete, click on the "Main Menu" button which appears at the end of the "Company Information" form to proceed with the remaining forms.

Company Information

COMPANY INFORMATION

Please enter your company information below.

Parent OCN refers to the OCN of the reporting carrier's parent company located within the applicable state. If the reporting carrier has more than one parent company in a particular state (e.g., if the reporting carrier is a subsidiary of company A, which in turn is a subsidiary of company B, so that both companies A and B could be deemed the reporting carrier's "parent"), the reporting carrier should report the OCN of the highest parent company (in this example, the appropriate parent would be Company B).

Parent Company Name	<parent company="" name=""></parent>	Parent Company OCN(s) = <pc ocn(s)=""></pc>
Service Provider Name	<service name="" provider=""></service>	Service Provider OCN = <sp ocn=""></sp>
Company Address	<company address=""></company>	SP Service Type = <sp service="" type=""></sp>
Address 2	<address 2=""></address>	<sp service="" type=""> ▼</sp>
City	<city></city>	tal German Types
State	<state></state>	
Zip	<zip></zip>	All Changes to Parent Company Name, SP
Contact Name	<contact name=""></contact>	Name, Address, Contact Information,
Contact Tel #	<contact tel#=""></contact>	OCN(s) and Service Type must be made on
Fax #:	<fax #=""></fax>	this page.
E-mail	<e-mail></e-mail>	

If you are a Rural Telephone Company as defined in the Communications Act, 47 U.S.C. § 153(37), click on the "Rural Certification Form" button below.



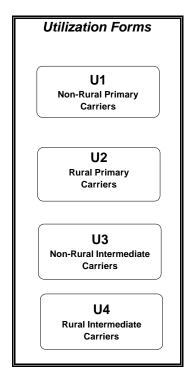
To proceed, click on the "Main Menu" button below which will take you to detailed instructions, the utilization forms and the forecast forms. Press "Gen Instructions" to return to the previous page.

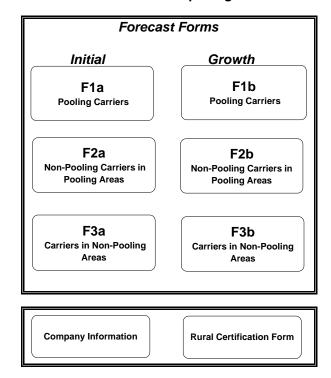


MAIN MENU

Instructions Submit Forms

>>> Please Read Detailed Instructions Before Completing Forms <<<





All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form U1

Check to modify previously submitted form.

UTILIZATION REPORTING FORM (FOR NON-RURAL PRIMARY CARRIERS)

			Main I	<i>l</i> lenu			Add 1K B			Add a Full Code	
Parent Company N			<parent co<="" td=""><td></td><td></td><td></td><td></td><td></td><td></td><td><pc ocn(s)=""></pc></td><td></td></parent>							<pc ocn(s)=""></pc>	
Service Provider Na			<service pi<="" td=""><td></td><td>ne></td><td></td><td>Se</td><td></td><td>vider OCN = <</td><td></td><td></td></service>		ne>		Se		vider OCN = <		
Company Address Address 2			<company 2<="" <address="" td=""><td></td><td></td><td></td><td></td><td>SP 56</td><td>ervice Type = <</td><td>SP Service Type></td><td></td></company>					SP 56	ervice Type = <	SP Service Type>	
City				>			+				
State			+								
Zip			<zip></zip>				-				
Contact Name			<contact n<="" td=""><td>ame></td><td></td><td></td><td>1</td><td></td><td></td><td></td><td></td></contact>	ame>			1				
Contact Tel #			<contact td="" to<=""><td></td><td></td><td></td><td>1</td><td></td><td></td><td></td><td></td></contact>				1				
Fax #:			<fax #=""></fax>								
E-mail			<e-mail></e-mail>								
:	**	********			**** Utiliza ਰ	tion ******	******	******	******	******	
NPA-NXX	x	Rate Center Name	Assigned	Intermed	Reservec	Aging	Admin	Available	Donated to Pool	Utilization	Notes

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form U2

Check to modify previously submitted form

UTILIZATION REPORTING FORM (FOR RURAL PRIMARY CARRIERS)

Main Menu

Add a Rate Ctr/Code

Parent Company Name	<parent company="" name=""></parent>	Parent Company OCN(s) = <pc ocn(s)=""></pc>
Service Provider Name	<service name="" provider=""></service>	Service Provider OCN = <sp ocn=""></sp>
Company Address	<company address=""></company>	SP Service Type = <sp service="" type=""></sp>
Address 2	<address 2=""></address>	
City	<city></city>	
State	<state></state>	
Zip	<zip></zip>	
Contact Name	<contact name=""></contact>	
Contact Tel #	<contact tel#=""></contact>	
Fax #:	<fax #=""></fax>	
E-mail	<e-mail></e-mail>	

NPA-NXX Rate Center Name	State	Assigned	Reserved	Nesel Ved	Aging	Admin	Available	Donated to Pool	Utilization	Notes

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form U3

Check to modify previously submitted form

UTILIZATION REPORTING FORM (FOR NON-RURAL INTERMEDIATE CARRIERS)

	Main Menu	Add a Full Code	Add a 1K Block
Parent Company Name	<parent company="" name=""></parent>	Parent Company OCN(s)	= <pc ocn(s)=""></pc>
ervice Provider Name	<service name="" provider=""></service>	Service Provider OCN	
company Address	<company address=""></company>	SP Service Type	= <sp service="" type=""></sp>
ddress 2	<address 2=""></address>		•
ity	<city></city>		
tate	<state></state>		
ip	<zip></zip>		
ontact Name	<contact name=""></contact>		
ontact Tel #	<contact tel#=""></contact>		
ax #:	<fax #=""></fax>		
E-mail	<e-mail></e-mail>		
	**************	**************************************	**********

	Utilization									
NPA-NXX X Rate	posigned section with the context Name value of the context Name value of the context of the con	Intermed	Aging Admin	Available	Quantity of Numbers Received	Utilization	Notes			

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form U4

Check to modify previously submitted form

UTILIZATION REPORTING FORM (FOR RURAL INTERMEDIATE CARRIERS)

Main Menu

Add a Rate Ctr/Code

Parent Company Name	<parent company="" name=""></parent>	Parent Company OCN(s) = <pc ocn(s)=""></pc>
Service Provider Name	<service name="" provider=""></service>	Service Provider OCN = <sp ocn=""></sp>
Company Address	<company address=""></company>	SP Service Type = <sp service="" type=""></sp>
Address 2	<address 2=""></address>	
City	<city></city>	
State	<state></state>	
Zip	<zip></zip>	
Contact Name	<contact name=""></contact>	
Contact Tel #	<contact tel#=""></contact>	
Fax #:	<fax #=""></fax>	
E-mail	<e-mail></e-mail>	

NPA-NXX	Rate Center Name	State	Assigned	Intermed	Reserved	Aging	Admin	Available	Quantity of Numbers Received	Utilization	Notes

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F1a

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR POOLING CARRIERS) (INITIAL THOUSAND BLOCKS)

Main Menu

Add NPA/ Rate Ctr

Parent Company OCN(s)

Service Provider OCN

Growth Forecast Form F1b

<PC OCN(s)>

<SP OCN>

SP Service Type = <SP Service Type>

Parent Company Name <Parent Company Name> Service Provider Name <Service Provider Name> **Company Address** <Company Address> Address 2 <Address 2> City <City> State <State> Zip <Zip> **Contact Name** <Contact Name> Contact Tel # <Contact Tel#> Fax #: <Fax #> E-mail <E-mail>

Pooling Area Forecast In 1K Blocks Per Rate Center, Per Year (Initial 1K Blocks)

NPA <npa></npa>	LERG Rate Center <rate center=""></rate>	State <state></state>	○ Year 1	○ Year 2	○ Year 3	○ Year 4	⊙ Year {	Tota o 1K Block
	Total 1K Blocks :	=	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F1b

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR POOLING CARRIERS) (GROWTH THOUSAND BLOCKS)

Main Menu

Add NPA/ Rate Ctr

Parent Company OCN(s) = <PC OCN(s)>
Service Provider OCN = <SP OCN>

SP Service Type = <SP Service Type>

Initial Forecast Form F1a

Parent Company Name	<parent company="" name=""></parent>
Service Provider Name	<service name="" provider=""></service>
Company Address	<company address=""></company>
Address 2	<address 2=""></address>
City	<city></city>
State	<state></state>
Zip	<zip></zip>
Contact Name	<contact name=""></contact>
Contact Tel #	<contact tel#=""></contact>
Fax #:	<fax #=""></fax>
E-mail	<e-mail></e-mail>

Pooling Area Forecast In 1K Blocks Per Rate Center, Per Year (Growth 1K Blocks)

NPA	LERG Rate Center	State	Year 1	Year 2	Year 3	Year 4	Year 5	Total 1K Blocks
<npa></npa>	<rate center=""></rate>	<state></state>	0	0	0	0	0	0
	Total 1K Blocks =	=	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F2a

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR NON-POOLING CARRIERS IN POOLING AREAS) (INITIAL CODES)

Service Provider OCN = <SP OCN>

SP Service Type = <SP Service Type>

Main Menu

Add NPA/Rate Ctr

Parent Company OCN(s) =

Growth Forecast Form F2b

<PC OCN(s)>

Parent Company Name	<parent company="" name=""></parent>
Service Provider Name	<service name="" provider=""></service>
Company Address	<company address=""></company>
Address 2	<address 2=""></address>
City	<city></city>
State	<state></state>
Zip	<zip></zip>
Contact Name	<contact name=""></contact>
Contact Tel #	<contact tel#=""></contact>
Fax #:	<fax #=""></fax>
E-mail	<e-mail></e-mail>

Forecast Reported In NXX(s) Per Rate Center, Per Year (Initial Codes)

NPA <npa></npa>	LERG Rate Center <rate center=""></rate>	State <state></state>	o Year 1	o Year 2	o Year 3	o Year 4	o Year 5	Total O NXX(s
	 Tot	al NXX(s) =	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F2b

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR NON-POOLING CARRIERS IN POOLING AREAS) (GROWTH CODES)

Parent Company OCN(s) =

Service Provider OCN

Main Menu

Add NPA/ Rate Ctr Initial Forecast Form F2a

<PC OCN(s)>

<SP OCN>

SP Service Type = <SP Service Type>

Parent Company Name	<parent company="" name=""></parent>
Service Provider Name	<service name="" provider=""></service>
Company Address	<company address=""></company>
Address 2	<address 2=""></address>
City	<city></city>
State	<state></state>
Zip	<zip></zip>
Contact Name	<contact name=""></contact>
Contact Tel #	<contact tel#=""></contact>
Fax #:	<fax #=""></fax>
E-mail	<e-mail></e-mail>

Forecast Reported In NXX(s) Per Rate Center, Per Year (Growth Codes)

NPA <npa></npa>	LERG Rate Center <rate center=""></rate>	State <state></state>	o Year 1	o Year 2	o Year 3	o Year 4	o Year 5	Total O NXX(s
	Tot	al NXX(s) =	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F3a

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR CARRIERS IN NON-POOLING AREAS) (INITIAL CODES)

Parent Company OCN(s) =

Service Provider OCN

Main Menu

Add NPA

Growth Forecast Form F3b

<PC OCN(s)>

<SP OCN>

SP Service Type = <SP Service Type>

Parent Company Name	<parent company="" name=""></parent>
Service Provider Name	<service name="" provider=""></service>
Company Address	<company address=""></company>
Address 2	<address 2=""></address>
City	<city></city>
State	<state></state>
Zip	<zip></zip>
Contact Name	<contact name=""></contact>
Contact Tel #	<contact tel#=""></contact>
Fax #:	<fax #=""></fax>
E-mail	<e-mail></e-mail>

Forecast Reported In NXX(s) Per NPA, Per Year (Initial Codes)

NPA <npa></npa>	State <state></state>	o Year 1	o Year 2	o Year 3	o Year 4	o Year 5	Total O NXX(s
	Total NXX(s) =	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Form F3b

Check to modify previously submitted form.

FORECAST REPORTING FORM (FOR CARRIERS IN NON-POOLING AREAS) (GROWTH CODES)

Parent Company OCN(s) =

SP Service Type

Service Provider OCN = <SP OCN>

Main Menu

Add NPA

Initial Forecast Form F3a

<PC OCN(s)>

<SP Service Type>

Parent Company Name <Parent Company Name> **Service Provider Name** <Service Provider Name> **Company Address** <Company Address> Address 2 <Address 2> City <City> State <State> Zip <Zip> <Contact Name> **Contact Name** <Contact Tel#> Contact Tel # Fax #: <Fax #> E-mail <E-mail>

Forecast Reported In NXX(s) Per NPA, Per Year (Growth Codes)

NPA <npa></npa>	State <state></state>	o Year 1	o Year 2	o Year 3	o Year 4	o Year 5	Total O NXX(s)
	 Total NXX(s) =	0	0	0	0	0	0

Numbering Resource Utilization/Forecast Report

All Information For Reporting Period Ending (Date)

>>>Please See Instructions Before Completing<<<

Rural Certification Form

RURAL CERTIFICATION FORM

This form must be completed by an officer of the reporting company

Main Menu Company Information

<SP Service Type>
OCN = **<SP OCN>**

certify that <Service Provider Name> operating as a is a "Rural telephone company" as defined in the Communications Act, 47 U.S.C. § 153(37).

Electronic Signature Type <Officer Name>
Telephone Number Type <Officer Number>

<Officer Name>.

INSTRUCTIONS FOR UTILIZATION AND FORECAST FORMS

Main Menu

>>> Please Read Thoroughly Before Completing Forms <<<

When to File:

Reporting carriers shall file utililization and forecast reports semi-annually on or before February 1 for the preceding 6 month reporting period ending on December 31, and on or before August 1 for the preceding 6 month reporting period ending on June 30. Reporting is mandatory.

PART 1 - UTILIZATION INSTRUCTIONS

Choose the appropriate utilization form from the "Main Menu" page by clicking on the appropriate button:

- U1 Non-Rural Primary CarriersAll carriers report at 1000 block level per Rate Center
- U2 Rural Primary CarriersAll carriers report at NPA-NXX code level per Rate Center.
- V3 Non-Rural Intermediate CarriersAll carriers report at 1000 block level per Rate Center
- Rural Intermediate CarriersAll carriers report at NPA-NXX code level per Rate Center.

Carriers that receive numbering resources both from the Numbering or Pooling Administrator and from another carrier, or that are rural carriers in some but not all areas, will need to complete more than one utilization form to account for all of their numbering resources.

Approved OMB Number 3060-0895 Est. Average Burden Per Response: 24 Hours

Carrier Types:

Primary Carrier is defined as a carrier that receives numbers directly from the Numbering or Pooling Administrator. Forms U1 and U2 are used by these carriers to report number utilization.

Intermediate Carrier is defined as a carrier that receives numbers from another carrier. Forms U3 and U4 are used by these carriers to report number utilization.

Rural Carrier is defined in the Communications Act, 47 U.S.C.§153(37). Rural carriers must, in addition to completing the appropriate utilization and forecast forms, complete a Rural Status Certification Form (available from the "Main Menu").

Utilization Data:

NPA-NXX

Rural carriers completing forms U2 or U4 report utilization at the NXX level. For each NXX in which your company has numbering resources, enter the NPA-NXX and the quantity of **Assigned, Intermediate, Reserved, Aging and Administrative** numbers. To add a line for a new code, click on the button at the top of the form labled "Add a Full Code".

NPA-NXX-X

Non rural carriers completing Forms U1 or U3 report utilization at the 1000 block level. For each NPA-NXX-X in which your company has numbering resources, enter the NPA-NXX-X and the quantity of **Assigned**, **Intermediate**, **Reserved**, **Aging and Administrative** numbers. To add a line for a new 1000 block, click on the button at the top of the form labeled "Add a 1K Block".

LERG Rate Center Name and State

Rural Carriers must also enter the name of each Rate Center in which your company has numbering resources as it appears in the LERG Table 8 under RC ABBREV. Also enter the state in which the Rate Center/NPA is located for which you are reporting.

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Usage Categories

Each utilization form requires that numbers be reported in five categories as defined in FCC Order 00-104. A sixth category, "Available," is automatically calculated and no entry is required.

Assigned: Enter the quantity of Telephone Numbers (TNs) that are classified as "Assigned" for each identified NPA-NXX or NPA-NXX-X. Assigned numbers are defined as "numbers working in the Public Switched Telephone Network under an agreement such as a contract or tariff at the request of specific end users or customers for their use, or numbers not yet working but having a customer service order pending. Numbers that are not yet working and have a service order pending for more than five days shall not be classified as assigned numbers."

Intermediate: Enter the quantity of TNs that are classified as "Intermediate" for each identified NPA-NXX or NPA-NXX-X. Intermediate numbers are defined as "numbers that are made available for use by another telecommunications carrier or non-carrier entity for the purpose of providing telecommunications service to an end user or customer." An exception to this requirement is numbers ported for the purpose of transferring an established customer's service to another service provider, in which case the numbers are classified as "Assigned" by the porting carrier and not counted by the receiving carrier.

For intermediate numbers provided by carriers to non-carrier entities, the providing carrier must report utilization for these numbers. Numbers assigned to end users by a non-carrier entity should be reported by the providing carrier as "Assigned." Any remaining numbers held by a non-carrier entity that are not assigned to end users shall be reported by the providing carrier as "Intermediate." The sum of numbers reported by the carrier for the non-carrier entity in these two categories should always equal the total of numbers held by the non-carrier entity.

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Reserved: Enter the quantity of TNs that are classified as "Reserved" for each identified NPA-NXX or NPA-NXX-X. Reserved numbers are defined as "numbers that are held by service providers at the request of specific end users or customers for their future use". Numbers held for specific end users or customers for more than 45 days shall not be classified as reserved numbers.

Aging: Enter the quantity of TNs that are classified as "Aging" for each identified NPA-NXX or NPA-NXX-X. Aging numbers are defined as "disconnected numbers that are not available for assignment to another end user or customer for a specified period of time." Numbers previously assigned to residential customers may be aged for no more than 90 days. Numbers previously assigned to business customers may be aged for no more than 360 days.

Administrative: Enter the quantity of TNs that are classified as "Administrative" for each identified NPA-NXX or NPA-NXX-X. Administrative numbers are defined as "numbers used by telecommunications carriers to perform internal administrative or operational functions necessary to maintain reasonable quality of service standards."

Donated to Pool: Enter an "X" if the NPA-NXX-X block has been donated to a pool.

Quantities of Numbers Received: Enter the total quantity of numbers received.

Notes: Intermediate carriers - enter the name of the carrier from which you received numbers. Primary carriers - enter the name of the entity to which you gave numbers.

Completion

Confirm that the data requested above has been provided for all of the numbering resources which are allocated to your company. The rate of utilization will be automatically calculated. No entry is required. After all utilization and forecast forms are complete, go to the "Main Menu" page and click on the "Submit Forms" button.

PART 2 - FORECAST INSTRUCTIONS

Choose the appropriate forecast form from the "Main Menu" page by clicking on the appropriate button:

- F1a Pooling Carriers Initial
- F1b Pooling Carriers Growth
- F2a Non-Pooling Carriers in Pooling Areas Initial
- F2b Non-Pooling Carriers in Pooling Areas Growth
- F3a Carriers in Non-Pooling Areas Initial
- F3b Carriers in Non-Pooling Areas Growth

Carriers that pool in some but not all areas in which they have numbering resources, or that have numbering resources in both pooling and non-pooling areas, need to complete more than one pair of forms to account for all of their numbering resources.

Carrier Types:

Pooling Carrier is defined as a carrier that donates to and receives numbers from a number pool. Forms F1a and F1b are used by these carriers to forecast number requirements.

Non Pooling Carrier in Pooling Areas is defined as a carrier that provides service in areas where there is number pooling, but does not donate to or receive numbers from the number pool. Forms F2a and F2b are used by these carriers to forecast number requirements.

Carrier in Non-pooling area is defined as a carrier that provides service in areas where there is no number pooling. Forms F3a and F3b are used by these carriers to forecast number requirements.

Approved OMB Number 3060-0895 Est. Average Burden Per Response: 24 Hours

Forecast Data:

Initial versus Growth

Initial numbering resources are the first numbering resources received by a carrier in a particular area. Growth numbering resources are additional numbering resources received by a carrier already established in a particular area.

NPA

Enter the NPA for which you are providing forecast data.

LERG Rate Center Name

Enter the name of each Rate Center name as it appears in the LERG Table 8 under RC ABBREV.

State

Enter the State in which the NPA or Rate Center is located for which you are providing forecast data.

Pooling Carriers

Enter the number of Initial and Growth 1000 blocks that your company will require for each applicable Rate Center for the next five years.

Non-Pooling Carriers in Pooling Areas

Enter the number of Initial and Growth NXX codes that your company will require for each applicable Rate Center for the next five years.

Carriers in Non-Pooling Areas

Enter the number of Initial and Growth NXX codes that your company will require for each applicable NPA for the next five years.

Approved OMB Number 3060-0895 Est. Average Burden Per Response: 24 Hours

Completion

Confirm that the data requested above has been provided for all applicable states, NPAs and Rate Centers. To add a Rate Center or NPA, click on the "Add NPA/Rate Center" button at the top of forms F1(a,b) and F2(a,b) or click on "Add NPA" for forms F3(a,b). After all forecast and utilization forms are complete, go the "Main Menu" page and click on the "Submit Forms" Button.

Submit Forms

If you are using the inter-active web site, this button will automatically submit the forms you have completed to NANPA. If you are running this application from a PC, please save this workbook to a file in an Excel® format (e.g. cocus.xls). Then send an e-mail to NANPA at cocus@neustar.com with the file you saved attached to the e-mail. If you are submitting the informtion via fax or EFT (Electronic File Transfer), please vist the NANPA website at http://www.nanpa.com for additional information. For additional questions or instructions contact NANPA at 1-202-533-2654.

Main Menu